Summary of New Claims

There are four (5) independent claims, twenty-four (33) dependent claims, and nine (9) multiple dependent claims. Add these new claims and Cancel Claims 11-12.

The filing fee for the claims are calculated as follows:

. FEE CALCULATION					
	NUMBER		NUMBER EXTRA	RATE	FEE
Total Claims	47	- 20 =	27	x \$25.00 =	\$675.00
Independent Claims	5	- 3=	2	x \$100 =	\$200.00
Multiple Dependent Examination Fee	9	-0	9	x\$180	\$1620.00
TOTAL FEES					\$2495.00

Payment: Check No. <u>7067</u>, in the amount of \$2495.00 is enclosed.

Respectfully Submitted,

hn E. Vandigriff

keg. 22,127

Tel: 972-899-1942 Customer No. 27382

12/19/2007 MKAYPAGH 00000134 10524677

01 FC:2615 02 FC:2614 03 FC:2616 04 FC:1206 675.00 OF 210.00 OF 185.00 OF 1425.00 OF